PTO/SB/06 (12-04)
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Substitute for Form PTO-875									1 M801043				
APPLICATION AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY								OR	OTHER THAN SMALL ENTITY				
			BER FILED	l i	ER EXTRA		RATE (\$)			RATE	FEE (\$)		
	SIC FEE CFR 1.16(a), (b), or (c)	, <b>V</b>	N/A		N/A		N/A		1	NA	911		
SE/	ARCH FEE DFR 1.16(A), (i), or (m)		N/A		N/A		N/A		İ	N/A	<del></del>		
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))		))	N/A		N/A		N/A		1	N/A			
TOTAL CLAIMS (37 CFR 1.16(I))		29	minus 2	0 = .	. 9		х -		OR	× 18-	162		
	EPENDENT CLAIN CFR 1.16(h))	-	) minus :		1		х -		1	х -			
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						96							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(J))							N/A			N/A			
* If the difference in column 1 is less than zero, enter *0" in column 2.							TOTAL			TOTAL	872		
APPLICATION AS AMENDED - PART II													
6	(Column 1) (Column 2) (Column 3)					n 3)	SMALL E	ENTITY	OR	OR OTHER THAN SMALL ENTITY			
AMENDMENT .		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	NUMBER PRESENT REVIOUSLY EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)	,	RATE (\$)	ADDI- TIONAL FEE (\$)		
	Total (37 CFR 1.15(1))	30	Minus	" 30	1.1		х •		OR	х •			
QN	Independent (37 CFR 1,16(h))	4	Minus	"" H	-1		x •		OR	х =			
₩.	Application Size Fee (37 CFR 1.16(s))												
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						N/A		OR	N/A			
1- > (						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE				
1/1	MAN	(Column 1)		(Column 2)	(Column	n 3)					-		
ENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESE EXTR		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)		
~	Total (37 CFR 1.16())	·30	Minus	. 30	•		x •		OR	х =			
AMENDA	Independent (37 CFR 1.16(h))	4	Minus	A	•	$\neg$	x -		OR	x =			
M	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))						N/A		OR	N/A			
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE				
" if the entry in column 1 is less than the entry in column 2, write "0" in column 3. " if the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "" if the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.													

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

09131012

CLAIMS AS FILED - PART I (Column 1)					(Colui	mn 2)	_	SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			29					RATE	RATE FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710	00.0
TOTAL CHARGEABLE CLAIMS			297 minus 20=		. 9			X\$ 9=		OR	X\$18=	16	2
INDEPENDENT CLAIMS			3 mi	nus 3 =	. 0			X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	67	2	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL I	NTITY	OR	OTHER SMALL I		
AMENDMENT A		REMAINING AFTER PF		HIGH NUM PREVIO PAID	BER PRESENT OUSLY EXTRA			RATE	ADDI- TIONAL FEE		RATE	TIO	DI- NAL EE
	Total	. 30	Minus	9	7	= ,	1 [	X\$ 9=		OR	X\$18=	الم	8
AME	Independent FIRST PRESEN	· 4	Minus	PENIDENT	CIAIM	= 1		X40=		OR	X80=	魚	
_	I I	AINTOIA OF IM	JETT CE DET	LINDLIN	OLAM		1	+135=		OR	+270=		
	26076							TOTAL ADDIT. FEE		OR ,	TOTAL ADDIT. FEE	(0	2
(Column 2) (Column 3)											•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIO	DI- NAL EE
NON	Total	·30 <u> </u>	Minus	!	30,	=	11	X\$ 9=		OR	X\$18=	/	/
AME	Independent	· 4	Minus	***	H	= (	4 F	X40=		OR	X80=	$\Box$	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							┛▐	+135=		OR	+270=	J	
	14						<b>Ŀ</b>	TOTAL DDIT, FEE		OR	TOTAL ADDIT, FEE		
2	110104	(Column 1)		(Colur		(Column 3)							
ENT C		CLAIMS HIGH REMAINING NUM AFTER PREVIO AMENDMENT PAID		BER DUSLY	IER PRESENT USLY EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIO	DI- NAL EE	
AMENDMENT C	Total	· 30	Minus	30	)	=	] [	X\$ 9=		OR	X\$18=		
	Independent	· 4	Minus	A	-/	=	41	X40=		OR	X80=		T
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b>」</b>	+135=		OR	+270=		$\sqcap$
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							TOTAL		OP.	TOTAL		+-
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													